## N11000000391

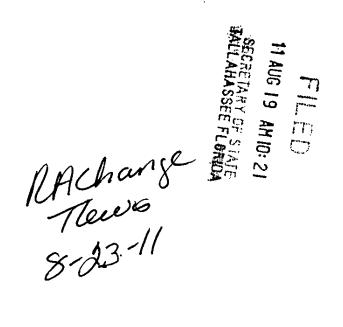
| (Requestor's Name)                      |     |
|---|-----|
| (Address)                               |     |
| (Address)                               |     |
| (City/State/Zip/Phone #)                |     |
| PICK-UP WAIT MAIL                       |     |
| (Business Entity Name)                  |     |
| (Document Number)                       |     |
| Certified Copies Certificates of Status |     |
| Special Instructions to Filing Officer: |     |
|   |     |
|   |     |
|   | DAC |

Office Use Only



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## **COVER LETTER**

| Division of Corporations  |
|---|
| SUBJECT: Ceressa's Enrichment and Empowerment A   |
| DOCUMENT NUMBER: N1100000391  |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.                     |
| Please return all correspondence concerning this matter to the following:   |
| Linda E. Harris Name of Contact Person  |
| Ceressa's Learning & Activity Center  |
| 3140 N.W. 21 St Avenue  |
| Oakland Park, Florida, 33309 City/State and Zip Code  |
| Ceressas LA Center Wive Com<br>E-mail address: (to be used for future annual report notification)                 |
| For further information concerning this matter, please call:  |
| Linda E. Harris at (954) 254-4411  Name of Contact Person at (954) 254-4411  Area Code & Daytime Telephone Number |
| Enclosed is a \$35.00 check made payable to the Department of State.  |

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florica   |
|--|
| in order to change its registered office or registered agent, or both, in the State of Florida.  |
| 1. The name of the corporation: Ceressa's Enrichment and Empowerment   |
| 2. The principal office address: 3140 N.W. 21 <sup>5t.</sup> Avenue Oakland Park; Florida 33309  |
| 3. The mailing address (if different): 2301 N.W. 41st Avenue #305  |
| Lauderhill, Florida 33313  |
| 4. Date of incorporation/qualification: 1 10 20 11 Document number: N1100000391  |
| 5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)   |
| Gilmore, Betty J.  |
| 811 South West 28th Avenue ==  |
| Fort Lauderdale, Fl. 33312 US. E T   |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Harris, Linda E.  |
| Harris, Linda E.   |
| 3140 N.W. 21st Avenue Oakland Park   |
| Florida 33309  |
| The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.   |
| Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.  |
| Printed or typed name and title  Auxiela Harris/Treasurer  Printed or typed name and title   |
| I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change. |
| Olella Collevis 8.15.11  |
| Signature of Registered Agent Date   |
| If signing on behalf of an entity:   |
| Typed or Printed Name  |
| * * * FILING FEE: \$35.00 * * *  |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314